33880v1

a. PTO-1449

Copies of IDS Citations

[Page 1 of 2]

02 FC:2006

03 FC:2202

04 FC:2201

370-00 CH

207.00 CH

42.00 CH

PTO/SB/29 (10-00)
Approved for use through 10/31/2002. QMB 0651-0032
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Uı	nder the Paperwork Reduction Act	of 1995, no persons are requ	uired to respond to a collect	ION OF INTOMINATION	i uniess it ois	BEYS & VERO CINE CONTO HUMBS.
CLAIMS	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE		(5) CALCULATIONS
	TOTAL CLAIMS (37 CFR 1.16(c) or (j))	** 43*=	*23*	x \$18.00	=	\$ 414.00
	INDEPENDENT CLAIMS 37 CFR 1,16(b) or (i))	* 4**=	*1*	x \$ 84.00	=	84.00
	MULTIPLE DEPENDENT CLAIMS (if applicable) (37 CFR1.16(d))					
	BASIC FE (37 CFR 1.					740.00
	Total of above Calculations =					\$1,238.00
	Unentered Amendment previously filed September 8, 2002					-\$55.00
	* Reissue claims in excess of 20 and over original patent.  ** Reissue independent claims over original patent.  TOTAL =					\$591.00
6.	Small entity status: Applica	ant claims small entity	status. See 37 CFF	R 1.27.		
	The Commissioner is here following, to Deposit Accord		it overpayments or c	harge any fe	es, includii	ng but not limited to the
	a. Fees required under	er 37 CFR1.16.				
b. Ees required under 37 CFR1.17.						
c. Fees required under 37 CFR1.18.						
8. A check in the amount of \$ is enclosed.						
9. Payment by credit card. Form PTO-2038 is attached.						
10. 🔲 🕯	Applicant requests suspen-	sion of action under 3	7 CFR 1.103(b) (fee	under 37 CF	R 1.17(I)	enclosed).
11. 🔲	New Attorney Docket Num	ber, if desired				
	(Prior application Attorney Docket N	lumber will carryover to this	CPA <u>uniess</u> a new Attorney	Docket Number	has been pro	vided herein.)
12. a. 🧧	Receipt For Facsimile	•	-			
b. [2	Return Receipt Posto	ard (Should be specif	ically itemized, See	MPEP 503)		
13.	Other:					
<u>MOFE</u>	Tingpiorappikadan DNESSantwisore				<i>'</i> ,	
		12. NEW CORRE	SPONDENCE AD	DRESS		
<b>☐</b> Custome	er Number or Bar Code Label	(page Casomas Co		or	New c	orrespondence address below
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ty	State Zii			Zip Code		
ountry		Telephone		Fax		
	13. SIGNA	TURE OF APPLICAN	NT, ATTORNEY, OR	AGENT RE	QUIRED	
Name (Pi	rint /Type)		Shawn O'Dowl Date: October 17, 2002			
Signature			L 13:21			
	ion No. (Attorney/Agent)	34	687			
9		(Page 2 of 2)				